



# State of Washington Application for a Drought Permit

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid

Date Received

SEP 19 2005

CENTRAL REGION OFFICE

## Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Kennewick Irrigation District Home Tel: (509) 586 - 9111  
Mailing Address 12 West Kennewick Ave Work Tel: (509) 586 - 7663  
City Kennewick State WA Zip+4 99336 + 3832 FAX: ( ) -

## Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name Bill Pope Home Tel: ( ) -  
Mailing Address Work Tel: ( ) -  
City State Zip+4 + FAX: ( ) -  
Relationship to applicant KID Staff Engineer

## Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 6.0 ( ☐ gallons per minute or ☒ cubic feet per second) from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s) of IRRIGATION. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 310

☒ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From 9/15/05 to 10/15/05

## Section 4. WATER SOURCE

If SURFACE WATER					If GROUNDWATER			
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:					A permit is desired for _____ well(s).			
Number of diversions: <u>Columbia River/McKary Pool</u>								
Source flows into (name of body of water):					Size & depth of well(s):			
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: <u>1325' North, 1903' West of Southeast Corner of Section 23, Township 9, Range 28.</u>								
1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>NW</u>	<u>SE</u>	<u>23</u>	<u>9</u>	<u>28</u>	<u>Benton</u>			
For Ecology Use Date Received: <u>September 19, 2005</u> Priority Date: <u>SEPTEMBER 19, 2005</u> <u>BENTON</u>								
SEPA: Exempt/Not Exempt FERC License # _____ Dept. Of Health # <u>37</u>								
Date Accepted As Complete <u>09/19/05</u> By <u>[Signature]</u> Date Returned _____ By _____ WRIA: <u>37</u>								



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: None
- B. Briefly describe your proposed water system. (See instructions.)  
See Attached
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO  
PROVIDE DOCUMENTATION. See Attached

## Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: \_\_\_\_\_ Type of connection \_\_\_\_\_  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☐ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 20,201
- B. List total number of acres for other specified agricultural uses:
- |           |             |   |
|-----------|-------------|---|
| Use _____ | Acres _____ | } <u>See Attached</u><br><u>CROP AND WATER DATA</u><br><u>YEAR 2004</u> |
| Use _____ | Acres _____ |   |
| Use _____ | Acres _____ |   |
- C. Total number of acres to be covered by this application: 20,201
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO  
If yes, enter permit no: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.*

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

*See Attached*

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

*See Attached*

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

*Water is for the use of irrigation purposes throughout the Kennewick Irrigation District.*

B. Does the applicant own the land on which the water source is located?

☐ YES ☒ NO

If no, submit a copy of agreement:

*See Attached*

**I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.**

*V.V. Johnson mgr KID*  
Applicant (or authorized representative)

*9/15/05*  
Date

*Same*  
Landowner for place of use (if same as applicant, write "same")

*—*  
Date



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

Ecology is an Equal Opportunity employer.

To receive this document in an alternate format, contact the Water Resources Program at (360) 407-6600 (Voice) or 711 and 1-800-833-6388 (TTY).